

Virginia Department of Social Services
Division of Licensing Programs
Report of Foster Home Re-evaluation

Date of home visit to complete the evaluation: _____

Names of adult household members: _____

Names of children living in the home: _____

Names of household members present during the home visit (the home visit shall be made when both parents can be present, if this is a two parent household):

Medical Requirements:	Yes	No	Comments
1. Was a TB test or TB screening completed on all current household members?			
2. Has any individual come into contact with a known case of tuberculosis?			
3. Has any individual developed chronic respiratory symptoms?			

4. **If the answer to question 2 and 3 was no, skip to question 5.** If the answer was yes to question 2 or 3, the individual must obtain a report signed by a physician, his designee or an official of the local health department containing: a statement that the individual does not have tuberculosis in a communicable form including the date and type or types of tests and the results. If the test is positive or no test is done, the report must include a written explanation. The report must include an opinion as to whether or not the health of the individual household member will affect the care of the foster children.

If the answer to question 2 or 3 was yes, has the report (as described above) been obtained?

YES NO

If the answer to question 2 or 3 was yes, has the agency made plans for the immediate removal of any foster children if the examination revealed that the safety of the children was in jeopardy?

YES NO

5. What is the health status of family members? Is any family member being treated for an ongoing or major health problem? Does the health problem jeopardize the care of foster children?

Report of Foster Home Re-Evaluation

6. Does caring for foster children impact negatively on the health of any family member?

YES NO

IF YES, EXPLAIN:

Income

1. What is the current net monthly income of the household (excluding funds received for foster care maintenance)? _____
2. What is the amount for total monthly expenses of the household? _____
3. Are income and financial resources sufficient to assure the continuing maintenance of the foster family? YES NO
IF NO, EXPLAIN:

Child Care	YES	NO	N/A, two parent household and at least one foster parent is not employed outside the home.
If the foster parent is single or if the foster parents are both employed outside the home, are child care plans approved by the agency for the care of the child during an absence?			

Indicate the child care plan, including who provides the care:

Report of Foster Home Re-Evaluation

Background Checks	YES	NO	EXPLANATION
Central Registry --Has a check of the central registry been completed within the last three years on all current household members over the age of 14 not placed by a child-placing agency to determine whether or not the household member has a founded child abuse or neglect record? If no, please explain:			
Is there reason to believe that another check of the central registry is necessary?			
If yes, has another check of the central registry been completed?			
Criminal Record Check --Has a criminal record check been completed on all adult household members within the last three years? If no, please explain:			
Is there reason to believe that another criminal record check is necessary?			
If yes, has another criminal record check been completed?			
Sworn Disclosure --Has a sworn statement or affirmation been completed within the last three years by all adult household members, age 18 and older? If no, please explain:			

Home and Surroundings	YES	NO	COMMENT
1. The home has a working telephone?			
2. All doors and windows used for ventilation have screens?			
3. What is the method of ventilation for the rooms where the children sleep?			
4. Does the room where the children sleep have closet or drawer space or both for the clothing and personal possessions of children over 2?			
5. Does each foster child have a separate bed? (Exception: Two siblings of the same sex may share a double bed or larger.)			
6. How many children live in the foster home, including the parent's own children?			

Report of Foster Home Re-Evaluation

Home and Surroundings (continued...)	Yes	No	Comments
7. Does the number of children living in the foster home exceed 8? If yes, explain. (Exception: When placement of a sibling group in one home is in the best interests of the children, the total may exceed 8.)			
8. Are play and recreation areas, appropriate for the ages of children placed available?			
9. Is a study area for school age children available?			
10. Are housekeeping standards adequate to provide for the health and safety needs of children?			
11. Are neighborhood and community facilities accessible?			

12. Comment on the availability and use of the sleeping space in the home, including the number of beds available and the number of bedrooms.

Firearms	Yes	No	Comments
1. Are firearms or ammunition present in the home?			
2. If firearms are stored in the home, are the firearms stored in locked cabinets or a locked area not accessible to children? * <i>If no is checked, explain when and how the family will comply with the standard.</i>			
3. If ammunition is stored in the home, is the ammunition stored in a locked place separate from the firearms? * <i>If no is checked, explain when and how the family will comply with the standard.</i>			

Emergencies	Yes	No	Comments
The foster family has names and phone numbers of people to contact in case of emergency?			

Confidentiality	Yes	No	Comments
Does the foster family understand that records and information about children placed in the foster home is confidential?			

Report of Foster Home Re-Evaluation

Corporal Punishment	Yes	No	Comments
Does the foster family understand that they may not use corporal punishment with any child placed in foster care nor give others permission to do so?			

Child Abuse Reporting	Yes	No	Comments
Does the foster family understand that any suspected abuse, neglect, or exploitation of the children in care must be reported immediately?			
Vehicle Safety <i>*Under Virginia law, the driver is responsible for ensuring that all children in the vehicle are properly restrained.</i>	Yes	No	Comments
1. Does the foster family understand that all children under age 7 must be restrained in a seat that meets federal standards?			
2. Does the foster family understand that all children age 8 to age 15 must be properly belted no matter where the child is seated in the vehicle?			
3. Has a check of DMV records been completed for foster parents?			
4. Is there reason to believe another check of DMV records is needed?			
5. If yes, has a check been completed?			

Foster Family Re-Assessment

How has the foster family's expectation of foster parenting changed since becoming a foster family?

What is the foster family's current understanding of the types of children to be placed, attitudes towards biological parents and towards working with the agency?

Report of Foster Home Re-Evaluation

Discuss the ability of all family members to accept a foster child into their family?

How has the social and academic adjustment of the foster parents' biological children been affected since becoming foster parents?

How have general patterns of family life changed since becoming a foster family?

How have the relationships with extended family and friends changed since the last evaluation of the foster family?

Discuss any changes in family and marital relationships since the last evaluation of the foster family.

Report of Foster Home Re-Evaluation

Family Evaluation

Describe the adjustment of each child placed in the home since the last evaluation.

Describe or discuss the foster parents' performance in the following areas:

A. The foster parents' ability to relate to the children.

B. The foster parents' ability to help children reach their goals.

C. The foster parents' skills in working with particular types of problems.

D. The foster parents' ability to work with the agency in meeting the needs of the child.

Report of Foster Home Re-Evaluation

Please describe the relationship between the family members and the children placed by the agency.

Discuss the stability of the home including the marital relationship and any problems or significant changes since the last evaluation.

Recommendation

Is continued use of the foster home recommended?

YES

NO

If the recommendation is for continued use, please specify:

Age range_____

Gender_____

Type_____

Number of children which may be placed_____

Signature of staff person completing evaluation_____

Date _____